

## **SECTION OVERVIEW**

The role of the Children's Division (CD) is to assure the protection of children by assisting their caregivers in providing a safe and nurturing environment in which children can develop. To accomplish this task, CD partners with families and the community to assure child safety and well-being. This section will explore the role and responsibilities of CD staff, families, and community partners as we work together to protect children from abuse and/or neglect, promote child well being, and achieve permanency.

## **CHAPTER OVERVIEW**

This chapter will describe the role and responsibilities of the Children's Service Worker, Supervisor, and Agency Administrators.

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### **1.1 Mandate**

The Missouri Children's Division has statutory authority and responsibility for accepting and investigating all reports of child abuse and/or neglect of children under age 18. That authority comes to CD under RSMo Chapter 210. Other statutes (RSMo 207 and RSMo 211) charge CD with the responsibility for serving the needs of Missouri's children by providing remedial treatment services, and where needed, alternative placement outside the birth home when such placement is in the best interest of the child.

### **1.2 Roles and Responsibilities of Children's Division**

#### **Responsibilities of the Children's Division**

As the court-ordered legal custodian of the foster child, the Children's Division has the ultimate responsibility for ensuring that the child has the best possible foster care experience and that appropriate long-term plans are made. The agency also has a direct, vested interest in resolution of the problems or conditions affecting the status of the birth family.

Services of the agency which are aimed at supporting or reuniting the family, as well as all available and appropriate community resources, should be made a part of the case plan in an effort to utilize foster care for the least possible length of time.

When efforts to return the child to the birth family are not successful, the agency must move toward a permanent plan for the child, so that the child may be placed for adoption or another permanent plan may be developed.

The Children's Division responsibilities include:

- To provide well-trained, educated staff who are given the necessary support and training to carry out the job;
- To serve as the court-appointed legal custodian for the child;
- To provide the birth parent(s) with support and services and, when appropriate, guidance to other community resources, in an effort to enable them to resume their parental responsibilities or to prevent the use of foster care;
- To assist the birth parent(s) in resolution of conditions or problems which prevent returning the child home;
- To place the child in an approved foster home or licensed child care facility which is the least restrictive environment appropriate for that child. The foster home will be selected in view of adequacy to meet the food, shelter, clothing and emotional needs of the child;
- To ensure that foster parents are appropriately trained, provided opportunities and continually reevaluated;
- To provide the foster family or facility with sufficient background, needs and characteristics of the foster child as part of pre-placement activities;
- To develop a written case plan, with the birth parent(s) whenever possible, to provide for a timely exit from foster care; and to ensure that all team members are aware of their particular roles;
- To provide the foster child, birth parent(s) and foster family with the necessary support services to accomplish goals set out in the case plan;
- To work with birth parent(s) and foster parents to see that the child's emotional needs are met;
- To work with birth parent(s) and foster parents to see that the child's educational needs are met;
- To conduct regular staffings of the case;
- To provide the necessary medical or psychological services, evaluations, care or treatment needed by the child;

- To ensure that the child has planned regular contact with his/her birth parent(s) or provide services directed to removal or reduction of any barriers to visitation;
- To maintain regular contact with all team members according to the case plan;
- To keep all team members informed of significant changes in status of the case or individual team members;
- To provide educational opportunities in accordance with the child's potential and in accordance with RSMo 167.031; the child's educational plan is developed by the Family Support Team (FST). Plans that include private/home schooling require Juvenile court approval;
- To verify that the resource family has filed a signed, written declaration of enrollment with the Recorder of Deeds stating their intent for the child to attend a home school. This verification must be documented in the child's file;
- To provide whatever supports are required by the placement providers who will "act as the parents" in the educational planning and placement for students with disabilities attending public school.
- For youth in residential facilities, the Children's Service Worker is to "act as the parent" in making educational decisions until the Department of Elementary and Secondary Education can appoint a "surrogate parent."
- To provide opportunity for a religious experience with respect for the child's birth parent(s)' religion;
- To take the legal steps necessary to free the child for placement in another permanent home when return to the birth parent(s) is not possible;
- To assist the foster parent in the child's return home, particularly recognizing that the foster parent may grieve the loss of the child.

### **1.3 Roles and Responsibilities of the Children's Service Supervisor:**

The Supervisor shall:

- Assist the Children's Service Worker in assessing objectively the family's strengths and needs, based upon the significant safety and risk factors;

- Assist the Children's Service Worker in using the information gathered to develop an effective case plan with the family and other professionals involved with the family;
- Model good practice, problem-solving techniques, and effective child protection intervention strategies for the Children's Service Worker and other professionals involved with the family;
- Educate the Children's Service Worker regarding federal, state, and local statutes, as well as agency policies and procedures;
- Assign cases to Children's Service Workers;
- Provide staff supervision;
  - a) Act as a bridge between the Children's Service Worker and agency administration;
  - b) Be cognizant of the personal safety needs of staff;
  - c) Assist the Children's Service Worker in determining when the judicious use of an authoritative approach may be appropriate to motivate the CD in a positive way;
  - d) Assign case, provide clinical consultation, assist in determining intervention strategies for the family; and
  - e) Ensure that services are provided to the family in the event the Children's Service Worker is unavailable or the family is not currently assigned to a Children's Service Worker.

Related Subject: Section 3, Chapter 11 Supervision and Case Consultation.
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Related Subject: Section 7, Chapter 26, Supervisory Considerations.
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#### **1.4 Roles and Responsibilities of Agency Administrator**

The Administrator shall:

- Ensure that the agency's mission and purpose clearly promote good social work practice

- Create a work environment that supports sound social work practice and service delivery;
- Tracking fiscal resources and agency personnel; and
- Recruit and select skilled, culturally competent social work staff members and provide them with pre-service and in-service training opportunities that improve their capacity to engage families from a helping perspective.

### **1.5 Roles and Responsibilities of the Children's Service Worker**

The Children's Service Worker shall:

- Adhere to all Children's Division mandates, policies, and procedures as they relate to providing services to families;
- Respond to reports of child abuse and neglect;

Related Subject: Section 2, Chapter 4, Investigation Response.

- Initiate and continue involvement with the family until the child is safe from abuse or neglect and the risk of future abuse or neglect has been sufficiently reduced;

Related Subject: Section 3, Delivery of Services/Intact Families, and Section 4, Out-of-Home Care.

- Conduct a comprehensive assessment of the family, keeping child safety and risk as the primary focus;

Related Subject: Section 2, Chapter 5, Assessment.

- Determine if abuse or neglect has occurred (or is occurring), and intervene to protect the child;
- Assess the parents' ability and willingness to protect the child;
- Engage the child and family in identifying needs, strengths, and resources to improve child safety and well-being;
- Help develop and carry out a case plan with the family that leads to an adequate level of care for the child;

Related Subject: Section 3, Chapter 4 Development of the Family Plan for Change; and Chapter 5, Implementing the Family Plan for Change.

- Initiate protective action (without the cooperation of the parents, if necessary) to legally remove the child from the parents and to obtain adequate out-of-home care;
- Maintain the parent/child relationship, as appropriate, if the child is removed from the home;

Related Subject: Section 4, Chapter 6, Out-of-Home Placement Support Activities; and Chapter 7 Begin Work with the Family/Child(ren); and Chapter 8 Ongoing Casework for Out-of-Home Care.

- Maintain a comprehensive child protective services record on the family;

Related Subject: Section 5, Case Record Maintenance and Access.

- End services to the family when they are no longer necessary or appropriate;

Related Subject: Section 3, Chapter 9, Case Closing.

- Develop and sustain collaborative relationships with other members of the community to promote and support a community-based response to the protection of children.
- Model good practice, problem-solving techniques, and effective child protection intervention strategies for the Children's Service Worker and other professionals involved with the family;

#### **1.5.1 Developing the Children's Service Worker/Family Relationship**

The Children's Service Worker shall initiate the Family-Centered Services assessment process by attempting to establish rapport and convey that the Children's Service Worker is there to help the family help itself.

The following may assist in this process:

1. The Children's Service Worker should facilitate getting-acquainted activities as he/she would when initiating any relationship. Formal introductions should not be overlooked. Parents should be referred to as "Mr." or "Mrs." unless permission is obtained for less formal interaction. Inquiries about the family's daily schedule, and the most opportune times for home visits, will convey the

importance of family cooperation and involvement in the success of the casework;

2. The Children's Service Worker should allow the family to express their feelings. Active listening by the Children's Service Worker is the most appropriate response. This will encourage the family's open expression of their feelings and beliefs and may offer insight into the family's perception of the problem;

Related Subject: Chapter 5.1, of this section, Providing Services, and Section 7, Chapter 2, Family Communication, and Chapter 17, Relationship Building.
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3. The family may present a positive or negative first impression of itself that may not be genuinely descriptive. The family may attempt to discount the seriousness of the problems or convince the Children's Service Worker that the presenting problems are due to the actions or inactions of someone else. In other instances the family may attempt to test the limits and competence of the Children's Service Worker by being verbally hostile or with incessant complaints about the CA/N report and investigation process. After allowing reasonable ventilation, the Children's Service Worker must attempt to focus the family upon the present and future;

Related Subject: Section 7 Glossary Reference, Chapter 20: Working With Resistant Families.
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4. The concrete needs of the family should be considered as soon as possible. If the family is occupied with basic survival needs, other needs will not be a priority. Offering assistance in this area can help establish rapport and team building with the family;

Related Subject: Chapter 5, of this section, Attachment C, Crisis Intervention Funds.
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5. The casework process should be fully explained. The Children's Service Worker should clarify his/her role and what expectations exist for the family. During the assessment the Children's Service Worker shall describe the activities requiring family involvement and their purpose. The family will be informed that the Division expects involvement with the family to be time-limited and that the case will be closed when the family is meeting minimally acceptable community standards;
6. The Children's Service Worker should observe family roles and which members are likely to participate more readily than others. Involving those with influence may lead others to more readily cooperate.

### **1.5.2 The Importance of the Children's Service Worker's Attitude**

Because it is difficult to measure the impact of the Children's Service Worker's attitude on the family, it is easy to underestimate its importance. The family's acceptance of services and overall cooperation often depends on the manner in which services are offered.

To maximize Division effectiveness, staff contact with families must convey respect and consideration. These professional attitudes must be evident at intake and permeate all phases of the Children's Service Work process.

It is important to avoid using phrases and terminology that have been associated with hopelessness. Diagnostic terms are often vague and simplistic, rather than useful. Labels may tell us more about the person who applies them than about the family itself. The following principles are useful in cultivating and maintaining a therapeutic attitude:

- All children and youth have great potential for development, given a healthy and stimulating environment;
- No parent deliberately sets out to fail, whatever the outcome. There is probably no greater sense of failure than when one fails as a parent;
- Family problems are "symptoms" of a dysfunctional family system and send legitimate messages on how family members attempt to cope;
- Treatment emphasis is on coping, which is a continuous process, rather than on cure;
- The Children's Service Worker should approach family situations from a positive perspective. Don't ask "What is your problem?" but rather, "What do you hope for?";
- It is important to be satisfied with small gains and to be persistent in the pursuit of those gains;
- Enhancing family communication is important. What family members have to say to each other is probably more important than what we have to say to them;
- Intimacy and respect must go hand-in-hand. There is little room for either without clear and honest communication.



### 1.5.3 Implementing the Initial Contacts With the Family

NOTE: If the family is in crisis, the Children's Service Worker may need to provide crisis intervention services. This will require an immediate response, which will eliminate procedure #1 in this section.

Related Subject: Chapter 5.3, of this section, Crisis Intervention Guidelines.

1. Contact the family by letter or telephone for an appointment UNLESS the family is experiencing crisis that places the child in immediate harm and/or warrants removal from the home.

If contacting the family prior to the initial visit is not possible, and crisis intervention is not necessary, the Children's Service Worker should visit the home, introduce him/herself and schedule an appointment for a future date if an immediate meeting is not convenient. This will convey a sense of respect and demonstrate the Children's Service Worker's desire to involve the family in the treatment process.

2. **Conduct a face-to-face "in-home" interview with the parent(s)/caretaker(s) and child(ren) within the time frames indicated by SDM response priority or as directed by supervisor.**

**SDM Response Priority** – This tool provides criteria to determine the time frame in which the family should be contacted. There are three response levels. These levels take the place of the "Emergency Contact" field in the CA/N automated system. However, current policy regarding initial contact with the children in the home remains in effect.

Note: For all investigations Missouri statutes require the child(ren) to be seen immediately in emergency situations and within 24 hours for non-emergency cases. Immediately is defined per policy as within 3 hours. For investigations where the only allegation is educational neglect, the victim must be seen within 72 hours. Regarding family assessments, all children in the household must be seen within 72 hours and contact must be initiated within 24 hours, unless the situation is an emergency.

**Level 1** – This is equivalent to an emergency report. Face-to-face contact with all victim(s) listed on the CA/N-1 must be made within three hours from the receipt of the report. A face-to-face contact with all other children living in the household must be made within 72 hours. Available resources shall be utilized to locate the children, including law enforcement assistance;

**Level 2** – Face-to-face contact with all victim(s) listed on the CA/N-1 must be made within 24 hours from receipt of the report. A face-to-face contact with other children residing in the home must occur within 72 hours;

Note: Investigations and family assessments with a level 2 response require a face-to-face contact with the child(ren) victim(s) and must be initiated within 24 hours.

**Level 3** – Face-to-face contact with all children (victims and home residents) must be made within 72 hours from receipt of the report. Investigations must be initiated within 24 hours.

Note: Face-to-face contact can be made by members of the multidisciplinary team (mandated reporters such as juvenile officer, or law enforcement personnel). Initial contacts can include phone calls or contact with appropriate persons in an attempt to make a home visit. Staff are reminded that statutes regarding our requirement to initiate an investigation or assessment within 24 hours have not changed.

The Children's Service Worker and family should attempt to accomplish as much as possible during the first visit. Usually the family assessment process is initiated at this time.

Related Subject: Section 2, Chapter 3.2, Parameters of Investigation Response, and Section 2, 5.5.6 Guide to a Family-Centered Services Assessment.

Goals of the initial visit(s) should include:

- Assessment of the current risk to the child(ren);
- Establishing rapport and relationship building;
- Dispelling confusion and clarifying roles;
- Defining the problem from the family's and the Children's Service Worker's perspectives;
- Determining the needed resources and available options;
- Addressing and alleviating the need for "hard" services; and
- Determining and enhancing the level of cooperation.

It is important for the Children's Service Worker and family members to be clear about what they expect from one another. Establishing ground rules may also provide a special opportunity to convey respect for the family. A family's legitimate activities and the legitimate requirements of in-home service may at times conflict. Discussing the possibility of problems ahead of time demonstrates respect for the family. It provides a head start on dealing with conflicts constructively.

In establishing "ground rules," the Children's Service Worker and the family should discuss issues, such as:

- How the family would like to refer to the Children's Service Worker if friends drop in unexpectedly;
- The procedure for canceling appointments, and legitimate reasons for doing so;
- Ways in which in-home visits can be made more productive. This may include asking the family to limit other visitors when the Children's Service Worker is present, turning off the TV or radio during visits, etc. Arrangements may need to be made for the care of very young children so they will not disrupt the visit too much;
- How to let the Children's Service Worker know if the family is feeling a need for a respite from services;
- The confidential nature of the service, and explanation of the agency's policy regarding confidentiality;
- The Children's Service Worker should explain to the family that services provided by or through the Division will be time-limited and provided within the framework of the family treatment plan; and
- The procedure(s) to terminate services and close the family's case.

Children's Service Workers will have many opportunities to demonstrate their recognition that the home is the parent(s)'s domain. Recognizing this, both actually and symbolically, helps empower the parents. It emphasizes their active role in the service process. This is an important method of counterbalancing the threats posed by social service intervention, no matter how justified or necessary.

#### **1.5.4 Initiating the Follow-up Family Assessment on an Open FCS Case**

1. Initiate the family follow-up assessment by involving all family members in the process.

- a) Determine if services are still needed by the family. If not, consult with the supervisor in order to close the case.
- b) If services are still needed by the family:
  - 1) Involve all family members in the assessment process to obtain a thorough description of the family system;
  - 2) Obtain the family's perception of the problem;
  - 3) Contact collateral sources to obtain additional information on the family and verify information. Use form SS-6, Authorization for Release of Information, when necessary, to obtain information;
  - 4) Describe the presenting problems or symptoms of the family system's dysfunction;
  - 5) Develop a diagnosis of the underlying reasons for the family discord which should be addressed;
  - 6) Identify the family's service needs and the appropriate resources to address the service needs;
  - 7) Communicate with family about the conclusions drawn from the assessment process.
- 2. Document the above items 1.b. (1-7) in the appropriate sections on the CPS-1 and CPS-1 A.

Related Subject: Section 2, Chapter 5,5., Assessment of, Safety and Section 2, Chapter 5,5.5 Assessment of Risk .
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